

**Contractors License Board
Government of Guam**

542 N. Marine Corp. Drive Route 1 – A, Tamuning, Guam 96911 Tel: 649-9676/2211; 646-7262; Fax 649-2210

FOR OFFICE USE ONLY

Date Received by CLB:

Case Number Assigned:

Investigator:

Date Assigned:

CONSUMER COMPLAINT FORM

INFORMATION ABOUT THE PERSON(S) MAKING THE COMPLAINT

Name	Contact Numbers
	(H) (W)
Mailing Address	
Residential Address (House number, street name and village)	

INFORMATION ABOUT THE CONTRACTOR

Company Name	Contact Number(s)
Mailing Address	
Office Location	

INFORMATION ABOUT THE CONTRACT

Type of Contract (Verbal/Written)	Amount of Contract	Date of Contract
Amount Paid to Contractor	Date Work Started	Date Work Ceased
Describe Contract or Agreement (Renovation, construction of New Home, Demolition, etc.		

Nature of Complaint (If needed, please attach additional sheets)

Signature of Complainant

Date